U. S. COST REIMBURSABLE (Department, bureau, or establishment)					-	PAID BY		
Voucher pres	ared at	· • · · · ·	•					
Voucher prepared at					Enel#2			
		v					10-36	60-
To		(Payee)	;			- [COPY /	OF Z
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No. and Date of	Date of Delivery	ARTICLES OR (Enter description, item number	SERVICES	ypply		UNIT	PRICE	AI
Order	or Service	schedule, and other inform Discount Terms	ation deemed necessary)		UANTITY	Cost	Per	Dol
		Cost						\$2,
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Complete								
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Shipped from	to		Government l				Total	\$2,
I certify that the	above bill is correct	and just and that payment has not h	peen received.			T use this		
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Date 5-21-	50 *P	when a like certificate is made	by payee on attached bill or bills)	Amount	verified:	correct for		12
Per		tle				ials) E	•	
Contract No.		/ Date	Reg. No.	Dat	e	I	nvoice Rec'	d.
Pursuant to autho	ority vested in me, I	certify that this account is correct an	d proper for payment.					
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Ву	THE REVERSE OF TH	IS FORM MUST BE EXECUTED WHEN PURCHAS	ES ARE MADE OR SERVICES SEC	ured withou	r written /	AGREEMENT	IN ANY FORM	

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